

Billing and Payment in the Child Care and Development Fund (CCDF)



A Training for Child Care Providers
In the Child Care Scholarship Program

Webinar Attendance Policy

- You will only receive a certificate if you attend and participate in the entire webinar training
- Certificates will be sent to you in 2 to 3 weeks to the e-mail address you provided when you registered for the webinar
- Webinar attendance is tracked through the website
- If you leave the webinar, you will not receive a certificate for this training, but you will still be responsible for the content of the entire training
- You will receive a certificate only if you complete the entire training

Taking Polls

- There will be polls taken at various times during this training
- The polls will track if you responded to the poll, but not your answers
- The polls will help the trainer know if the participants understood the key points
- Please participate in the polls. Participation in the polls is an expectation of attending the webinar

What is the Child Care and Development Fund?

- The Child Care and Development Fund (CCDF) is a Federal program that is funded by Federal and State funds
- The Federal government provides the major portions of the funds and the State provides the remainder
- The purpose of the CCDF is to provide assistance to eligible families with the cost of child care and to increase the quality of child care programs
- The CCDF is governed by Federal Law sections 658 and 418 and by Federal Regulation number 45 of the Code of Federal Regulations Subtitle A, Part 98
- The CCDF is governed by State Law RSA (Revised Statutes Annotated) 170:E and regulated by State Rule He-C 6910

The Provider Agreement

- You are required to sign a provider agreement form
- There are 2 types of agreements: licensed and license exempt
- You are required to comply with all the terms in the agreement
- Failure to comply with the terms of the agreement is grounds for termination from the program and further actions may be taken by the Department of Health and Human Services

Provider Agreement - 2

- You must comply with all of the rules, laws, policies and procedures. This includes enrollment requirements and billing directions regarding the child care scholarship program
- You may only bill after child care services have been provided as stated in the agreement
- Do not have the parent sign invoice forms in advance of services being provided

Provider Agreement - 3

- You may only bill when the child has been in attendance
- You must provide to the Department of Health and Human Services (DHHS) or its agents all records and information related to billing and services provided, upon request
- Bill weekly for services provided in the previous week using the Child Care Payment Request Invoice form 2500 or the automated web billing system
- Invoices will not be paid if they are completed incorrectly

Provider Agreement - 4

- Invoices must be paid by DHHS within 90 days of the services being provided or they will not be paid
- If you submit an invoice for services provided, you are certifying that the bill is true and accurate
- DHHS will recover any payment that was inaccurate or fraudulent

Provider Agreement - 5

- You must keep all information about the children and their families confidential as stated in the law on confidentiality
- You must keep attendance records that include start and stop times, your signature and the parent's signatures for seven years
- Billing invoices are not attendance sheets. You must have separate attendance sheets

Provider Agreement - 6

- Contact the Child Development Bureau if you believe you have received an overpayment
- You must keep current all licenses, permits, certifications and other documents as required by state and federal laws and regulations
- You must comply with the laws regarding civil rights, equal opportunity and non-discrimination

Provider Agreement - 7

- You are responsible for paying all your own state and federal taxes. DHHS is not your employer. We reimburse you for services provided
- You may be terminated from this scholarship program for failure to comply with this agreement or DHHS rules related to child care

Provider Agreement - 8

- This agreement may be terminated without advance notice if the child care provider has not billed in over a year, a child's health or safety is endangered or if the provider has been found to have billed DHHS fraudulently
- Any provider that has been found to have billed DHHS fraudulently will be disqualified from the Child Care Scholarship program for a minimum of five years and this may impact your licensing status

Family Eligibility

Step 1: The parent or guardian submits a completed application by NH Easy (<https://nheasy.nh.gov/>), phone or by paper application to the local DHHS District Office

Step 2: The nheasy website or DFA Family Services Specialist gives the parent or guardian a list of documents to verify the family's information. The checklist requires birth certificates, pay stubs, drivers licenses, verification of housing and other documents. The family submits these by mail or in person

Step 3: DHHS will approve or deny the application

Family Eligibility

Step 4: DHHS mails a Notice of Decision to the parent or guardian, but not to the child care provider

Step 5: If the child is eligible, DHHS mails a link letter to the child care provider that is very important for billing and records

Step 6: The parent or guardian completes a redetermination every 12 months or whenever redetermining for other programs such as SNAP (this is the food stamp program) or Medicaid.

Form 2530 and the Eligibility Determination Process

- The child care scholarship eligibility will not be determined until the parent submits a completed 2530 form that must be signed and dated by you, the provider, and the parent
- Signing the 2530 form does not require you to provide child care to the family. It proves that the family has found a potential provider

Form 2530 and the Eligibility Determination Process

- While you are waiting for the eligibility determination to be made, we recommend that you clarify what the parents must do to enroll their child with you. An example would be to tell the parent that the child must become eligible before you may bill DHHS for child care. Until the child becomes eligible, you may tell the parent that he/she must pay you directly for the child care services you provide
- We also recommend that providers create an information sheet on the family with phone numbers, addresses, emergency contacts, eligibility dates and redetermination dates

Form 2530 and New Children

- This form is on the DHHS website:

<http://www.dhhs.nh.gov/dcyf/cdb/forms.htm>

- The form may be filled out by either you or the parent, but both of you must sign it
- If you are license exempt (not required to be licensed by Child Care Licensing), you need to answer 2 more questions regarding the number of children you care for and how many children are related to you

Form 2530 and New Children

- If you are license exempt, you may not care for more than 3 unrelated children at any given time
- Make sure the signatures and dates are entered and in the correct locations
- Don't use nicknames for the children like Chucky for Charles
- Make sure the form is filled out completely

Form 2530 and New Children

- Always make copies of this form and other forms you need to complete
- It is usually the parent that mails, faxes or brings the completed 2530 form to the District Office, but the provider may also send it
- It will take time for DHHS to scan the form and enter it into the data system along with other documents before a link can be established

CHILD CARE PROVIDER VERIFICATION

Child Care Provider's Name and Physical Address:

Name: _____

Business Name: _____

Address: _____

Telephone #: _____

or

Message #: _____

Email: _____

Parent's Name and Physical Address:

Name: _____

Address: _____

Telephone #: _____

Email: _____

Is the Child Care Provider Licensed with Child Care Licensing? Yes ☐ No ☐

IF THE PROVIDER IS NOT LICENSED PLEASE ANSWER THE NEXT TWO QUESTIONS:

- Indicate the total number of children for whom you provide child care, other than your own? _____
- How many of these children are related to you? _____

INDIVIDUAL DATA

CHILD'S FULL NAME		DATE OF BIRTH (mm/dd/yy)	DATE CARE BEGAN (mm/dd/yy)	# DAYS PER WEEK CARE PROVIDED	# HOURS PER WEEK CARE PROVIDED	TOTAL COST PER WEEK (Actual Charge)
(First)	(Last)					

Child Care is provided in: ☐ Child's Home ☐ Provider's Home ☐ Child Care Center

The Department of Health and Human Services does not endorse any child care providers. Selection of a provider is the decision of the parent and the Department assumes no liability for safety, protection, or quality of care.

I certify that the information provided is true and correct.

I certify that I have read and understood the instructions provided.

I understand that the Department may release child care payment information to the above-named provider, for the purpose of verifying child care scholarship payment by the Department of Health & Human Services.

Parent's/Guardian Signature

Parent's Social Security Number (Optional)

Date

Child Care Provider's Signature

Child Care Provider's Resource ID Number (if known)

Date

Give or mail a copy to the District Office or NHEP site. Keep a copy of this form for your records

Provider Notice

- If the child is determined to be eligible, the Provider Notice or “link letter” will be mailed to you and will contain the following information:
 - The child’s name and RID (Recipient ID) number for each child in the family
 - The cost share for each child
 - The eligibility dates that indicate when you may start billing for child care and when the child’s eligibility ends
- Keep every provider notice so you have the most recent information about the cost share and eligibility dates
- Changes in family income will change the cost share. The cost share may change frequently
- You may not bill for days that the child is not eligible

Cost Share – What is it?

- Federal regulations require states to establish a sliding scale for parents to pay a portion of the child care costs
- Cost share is the amount of child care cost that is assigned by DHHS to all parents receiving employment related child care scholarships
- DHHS determines cost share for parents receiving Preventive or Protective child care on a case by case basis

Cost Share – What is it?

- The cost share is calculated by assigning a percentage of the family income in relation to the family's size to determine the "Step" level
- The cost share is assigned to the family and is divided equally among all the eligible children regardless of age
- The cost share is different for every family
- The cost share is listed on the "link letter" you receive

Eligibility and Cost Share

(FPL means Federal Poverty Level)

Step	Eligibility	Percentage of Family Income Assigned to Cost Share
1	Less than or = 100% FPL	5.28%
2	Between 101% - 120% FPL	8.0%
3	Between 121% - 140% FPL	10.5%
4	Between 141% - 160% FPL	13.5%
5	Between 161% - 190% FPL	16.5%
6	Between 191% - 220% FPL	26.0%
7	Between 221% - 250% FPL	27.0%

Cost Share – Continued

- The cost share is deducted from the Standard Rate
- The parent pays the cost share directly to you, the provider
- It is not required that you charge the parent the cost share
- If the cost share is more than the Standard Rate, you will not receive payment from DHHS

What is the Standard Rate?

What is an eligibility level?

**CHILD CARE SCHOLARSHIP PROGRAM MAXIMUM
WEEKLY STANDARD RATES EFFECTIVE JULY 4, 2011**

Licensed Child Care Center

Level of Service	Child Age in Months	Weekly Rate
Full Time	1-17	\$197.06
Full Time	18-35	\$186.94
Full Time	36-78	\$164.54
Full Time	79-155	\$120.00
Half Time	1-17	\$152.56
Half Time	18-35	\$144.73
Half Time	36-78	\$127.39
Half Time	79-155	\$75.00
Part Time	1-17	\$76.28
Part Time	18-35	\$72.37
Part Time	36-78	\$63.69
Part Time	79-155	\$37.50

Licensed Family Home

Level of Service	Child Age in Months	Weekly Rate
Full Time	1-17	\$153.53
Full Time	18-35	\$150.00
Full Time	36-78	\$146.49
Full Time	79-155	\$78.53
Half Time	1-17	\$118.86
Half Time	18-35	\$116.13
Half Time	36-78	\$113.41
Half Time	79-155	\$60.00
Part Time	1-17	\$59.43
Part Time	18-35	\$58.06
Part Time	36-78	\$56.71
Part Time	79-155	\$30.11

License-Exempt Center

Level of Service	Child Age in Months	Weekly Rate
Full Time	1-17	
Full Time	18-35	
Full Time	36-78	
Full Time	79-155	\$60.00
Half Time	1-17	
Half Time	18-35	
Half Time	36-78	
Half Time	79-155	\$37.50
Part Time	1-17	
Part Time	18-35	
Part Time	36-78	
Part Time	79-155	\$18.75

License-Exempt Family Home

Level of Service	Child Age in Months	Weekly Rate
Full Time	1-17	\$107.47
Full Time	18-35	\$105.00
Full Time	36-78	\$102.54
Full Time	79-155	\$54.97
Half Time	1-17	\$83.20
Half Time	18-35	\$81.29
Half Time	36-78	\$79.39
Half Time	79-155	\$42.00
Part Time	1-17	\$41.60
Part Time	18-35	\$40.65
Part Time	36-78	\$39.69
Part Time	79-155	\$21.08

Family Eligibility and Cost Share

Step	Eligibility Limits	Percent of Family Income Assigned to Cost Share
1	$\leq 100\%$ FPL	5.25%
2	$101\% \text{ FPL} \leq 120\% \text{ FPL}$	8%
3	$121\% \text{ FPL} \leq 140\% \text{ FPL}$	10.5%
4	$141\% \text{ FPL} \leq 160\% \text{ FPL}$	13.5%
5	$161\% \text{ FPL} \leq 190\% \text{ FPL}$	16.5%
6	$191\% \text{ FPL} \leq 220\% \text{ FPL}$	26%
7	$220\% \text{ FPL} \leq 250\% \text{ FPL}$	27%

Families are required to contribute to the cost of care. The family cost share will be divided equally among all eligible children each week.

Providers caring for children with verified disabilities can be reimbursed an additional amount per week.

Full time = \$50.00 per week

Half time = \$30.00 per week

Part time = \$15.00 per week

Contact the local District Office to obtain the Form 2628, Verification for a Child with a Disability.

Full Time Level of Service = 31 or more hours per week
Half Time Level of Service = 16 – 30 hours per week
Part Time Level of Service = 1 – 15 hours per week

- OVER -

Cost Share versus Co-Pay

- As stated on slide 22, the cost share is assigned by DHHS and is deducted from the Standard Rate
- If the Standard Rate is less than you charge private pay families, you may charge the scholarship family the difference between the Standard Rate and your weekly rate. That charge is the co-pay
- The most you may charge the family is the cost share and the difference between the Standard Rate and your weekly rate or co-pay. You may not charge more than your weekly rate for private pay families

Cost Share versus Co-Pay

- You may choose not to charge the family the cost share or the co-pay
- If you charge the family the cost share and co-pay, and they do not pay, you may use the same policies as for private pay families
- DHHS does not penalize or sanction families for non-payment

Cost Share – Continued

- Example: Your weekly rate is \$200 per week and the Standard Rate is \$150

A family with 2 eligible children receiving scholarship assistance has a cost share of \$50 per week. The family will pay you \$50 a week in cost share for both children or \$25 a week for each child. Co-pay is the difference between your weekly rate and the cost share or \$50.

Cost-Share \$50 + Co-Pay \$50 =

DHHS pays \$100

Family owes you \$100



Good Business Practice

- The parent is responsible for paying all of the child care costs until they are determined to be eligible for the scholarship. If you charge the parent for services before you receive a determination “link letter” that the child is eligible and the child becomes eligible when the parent has already paid you for services, you must reimburse the parent when you receive payment from DHHS for those services
- Ask the parent where she/he is employed, the employer’s name, phone number and address. Keep this on your information sheet

Good Business Practice

- We recommend that you develop a contract with the family to clarify what you expect from them and what they should expect from you.
- In the contract you develop, note the hours that the children will be in your care and when payments are due to you. You should also clearly state what will happen if you do not receive payment from the family

The Wait List – What is it?

- Because DHHS sometimes will not have funds to pay for all eligible children, there may be a Wait List for the child care scholarship
- Children whose families are receiving FANF or TANF or whose case has closed within the past 90 days are exempt from the Wait List
- Children receiving preventive or protective child care or whose case has closed within the past 90 days are exempt from the Wait List

The Wait List – What is it?

- DHHS will not pay for child care while the child is on the Wait List
- Currently, there is no Wait List

The Wait List – Continued

- Children whose parents earn less than 100% of the Federal Poverty Level and whose siblings are receiving a child care scholarship will be in the first priority list. All other children will be on the second priority list
- Children will be released from the Wait List based on the application date and priority
- Children will be released from the Wait List in the following order:
 - 2 children from the first priority list
 - 1 child from the second priority list

How Release from the Wait List Works

First Priority List

Susan (app date 01/02)

Mark (app date 01/03)

Tabitha (app date 01/04)

Seth (app date 01/06)

Second Priority List

Joe (app date 01/02)

Cindy (app date 01/02)

Tom (app date 01/03)

Ruth (app date 01/03)

Susan and Mark will be released first. Next will be Joe's turn. Then Tabitha and Seth will be released. After that, Cindy will be released.

Provider Rates and Provider Types

- The Weekly Standard Rate depends in part on the type of child care provider the family chooses. You will enter your provider type on the billing form 2500. In web billing system, the provider type is automatically entered by the system
- 31 – Licensed child care center
- 32 – License exempt family, friend and neighbor homes
- 33 – Licensed family homes including licensed group homes
- 34 – License exempt facilities including school based after school programs and recreation programs

Provider Rates and Provider Types

- If your provider type changes, you must notify the Child Development Bureau immediately because the weekly rate used to pay you will change
- If you do not contact the Child Development Bureau, you will have to repay the difference between the previous payment rate and the new payment rate

Provider Rates and Child Age

- The Standard Rate for any child depends in part on the age of the child
- Infants: 1 to 17 months
- Toddlers: 18 to 35 months
- Preschool and Kindergarten: 36 to 78 months or 6 ½ years
- School age: 79 to 155 months or up to the day before the 13th birthday

Provider Rates and Levels of Service

- The Standard Rate for any child depends in part on the authorized level of service
- The level of service depends on the hours a parent is in an approved work activity such as employment, job search, training or an NHEP employability plan plus travel time
- The level of service is designed to support only work activities and commute time

Provider Rates and Levels of Service

- If you believe the parent is not in an approved work activity, talk with the parent about the issue to find out what is happening. Remind the parent that you may only bill when he/she is in the work activity and that he/she must pay you directly for child care services you provide when he/she is not in the work activity
- Shopping and personal errands are not covered by the scholarship
- If you believe the parent is no longer participating in an approved work activity, you must report this to the assigned District Office DHHS worker
- Not reporting this may result in you being found to be committing or colluding in fraud

Provider Rates and Levels of Service

- The authorized service level tells you the maximum number of hours for which you will be paid for the child per week
- Payment is based on the number of hours the child attended for the week
- The level of service is designed to support only approved work activities and commute time
- These are the 3 levels of service
 - Full time: 31 or more hours per week
 - Half time: 16 to 30 hours per week
 - Part time: 1 to 15 hours per week

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Family Eligibility and Cost Share

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Families are required to contribute to the cost of care. The family cost share will be divided equally among all eligible children each week.

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Half Time Level of Service = 16 – 30 hours per week
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- OVER -

Level Of Service - Examples

- Full time: The parent is in an approved activity 31 hours or more. You will be paid at the same level whether the parent works 31 hours or 50 hours in the week
- Half time: The parent is in an approved activity between 16 and 30 hours per week. A provider that cares for a child for 17 hours will be reimbursed at the same rate as a child that is cared for 29 hours per week
- Part time: The parent is in an approved activity between 1 and 15 hours per week. A provider that cares for a child for 2 hours will be reimbursed at the same rate as a child that is cared for 14 hours per week

Provider Rates and Rate Setting

- The Standard Rate is based on 3 factors
 - The provider type
 - The child's age
 - The authorized level of service

Levels of Service and Child Attendance

- DHHS does not pay for any time that a child is not in attendance or the child care program is closed
- Levels of service encompass a range of hours of weekly attendance
- Standard Rates are based on authorized levels of service
- The Standard Rate minus the child's cost share will be paid for any of a number of hours in the range for the authorized level of service

Levels of Service and Child Attendance

- DHHS will pay the Standard Rate minus the child's cost share for the level of service or the rate you charge private pay families, whichever is less, as long as the the child meets the minimum number of hours in the authorized level of service
- If the child's attendance for the week is below the number of hours in the authorized level of service, you will be paid at the rate for the level of service that includes the hours that the child did attend

Levels of Service - Child Attendance Examples

- Annie is a 3 year old foster child authorized at the full time level of service at a licensed child care center. The Standard Rate for Full Time is \$150.00 a week and Half Time is \$110.00 a week
- Week 1: Annie attends 44 hours Monday through Friday so payment is at the Full Time rate
- Week 2: The center is closed on Monday. Annie attends 32 hours that week so payment is at the Full Time rate
- Week 3: Annie attends 24 hours Monday through Wednesday, but is out sick on Thursday and Friday. Payment will be at the Half Time rate and the parent will need to pay for Thursday and Friday

What Creates Variations in Payment?

- Changes in family income, the child's age or level of service. When any of these changes occur, the change will be effective on the following Monday
- Changes in the number of hours a child is in child care in any given week
- Changes in the hours a child care program is open in any given week

Billing

- Bill **every week** for the **previous** week
- Bill for the **entire** week so you don't lose money you have earned
 - Note that the billing form starts on a Monday and ends on a Sunday
 - If a child attends only on a Sunday of a given week, it must go on a separate billing form and not on the same billing form for the following week
 - Example: Sunday on the billing form is the 14th and the child attends that day. If the child attends on Monday the 15th, these dates must be entered on separate billing forms

Billing

- Have parents sign the **attendance sheets** and **billing forms** after the week has ended and before you submit the bill - **Every Week**
- If you have **not been paid** for any dates of service in the past 90 days, the link will close and you will **not get paid** for those services

**DO NOT COMPLETE
OR SIGN THIS FORM
UNTIL AFTER THE
SERVICE IS PROVIDED**

STATE OF NEW HAMPSHIRE
Department of Health and Human Services
Division for Children, Youth and Families
CHILD CARE PAYMENT REQUEST INVOICE

Form 2500
March 2009

Type or print all information. Please read the instructions before you begin. Be sure to sign your name at the bottom of the form.

PROVIDER NAME AND PHYSICAL ADDRESS:

Name: _____
Address: _____
Phone: _____

PARENT NAME AND PHYSICAL ADDRESS:

Name: _____
Address: _____
Phone: _____

CHILD'S NAME AND ID NUMBER: (only one child per form)

Last: _____ First: _____

Child's RID #

--	--	--	--	--	--	--	--	--	--	--

ENTER DATE
(MONTH/DAY/YEAR)

Monday

/ /

OCCURRENCE

1

2

3

ARRIVE TIME

AM

☐

PM

☐

DEPART TIME

AM

☐

PM

☐

PRESENT

☐

ABSENT

☐

Tuesday

/ /

1

2

3

Wednesday

/ /

1

2

3

Thursday

/ /

1

2

3

Friday

/ /

1

2

3

Saturday

/ /

1

2

3

Sunday

/ /

1

2

3

Provider Service Code:

--	--

Actual Amount Charged for this WEEK

\$	
----	--

Payment is requested for the child care services listed above. It is understood that payment will only be made for services actually received. No extra charges or fees have been listed for the days this child was not in child care. It is understood that payment will not be made if the person providing the child care does not live in the child's household, is a parent of the child or does not meet State license requirements.

I certify that I have read and understood the above statement and certify that the information on this form is true and accurate.

Child Care Provider's Signature

Child Care Provider's Resource ID Number

Date

The parent must be engaged in an authorized and approved activity such as employment, training or job search.

I certify that I was participating in an approved activity for the hours indicated on this form.

Parent/Guardian's Signature

Parent/Guardian's Social Security Number - *OPTIONAL*

Date

PD 09-05

SS # Optional

**Check only if the child
was scheduled
to attend that day**

**Provider code 31,
32, 33, or 34**

**No payment without
valid signatures**

**What you charge
private pay families
for your service**

How to Correctly Complete Invoices

- Print **clearly**
- Spell names **correctly** and use the full name (no nicknames)
- Include **original signatures** of both parent and the provider
- Record that date as a **number** mm/dd/yy (10/15/12) not as a written date such as October 15, 2012
- Record the **actual** arrival and departure times such as 7:52 AM arrival and 4:37 PM departure or the time the parent was in an approved activity plus commute time

Correctly Completing Invoices

- Check **AM** or **PM** and whether the child was **Present**. **Only check Absent** if the child was expected to attend that day
- If the child was absent but was expected to attend, check **Absent** and put in the usual times that the child would have been in attendance
- Enter your correct **provider code** – 31, 32, 33 or 34
- Enter the **actual charge** to the family for the service you provide with **2** digits after the whole number (ex. \$150.00)

Billing When the Cost Share is Higher Than the Standard Rate

- There may be times when the cost share is **more** than the standard rate. If you bill in this situation, you will **not be paid**. Do not bill when the cost share is higher than the Standard Rate unless the **child is school age or has a documented disability and the parent has submitted Form 2628 Verification for a Child with a Disability to the District Office**
- For **school age children** who need child care year round: During school weeks, they attend either part or half time and their cost share is higher than the standard rate. **Bill for these children at least every other month**. The payment will be \$0.00, but the payment system counts this as a payment, which allows the children to remain eligible for the child care scholarship during vacation weeks when they need full time care and the cost share is less than the full time standard rate.
- For children with a disability whose parents have submitted a Form 2628, submit the invoice weekly so you will receive the disability differential payment

Disability Differential – What is it?

- A **disability differential** is paid to a child care provider when there is a documented disability that is noted on a signed form 2628 – Verification for a Child with a Disability
- The **2628 form** must be signed by the child's **medical doctor, physician's assistant, advanced practice registered nurse, area agency director, school special education director** or **licensed mental health professional**
- The **child's disability must be significant enough for the child to require additional support in the child care program**
- The form was updated in April of 2012

Disability Differential – What is it?

- The form is only in effect for **1 year** and must be completed again in order for you to continue to receive the **disability differential** payment
- If the disability is permanent such as cerebral palsy, the form only needs to be filled out once. The professional who signs the form must indicate that the disability is permanent
- The disability differential payment for **Full Time attendance is - \$50** per week, **Half Time attendance - \$30** per week, and **Part Time attendance - \$15** per week
- Child care providers choose how to use the Disability Differential to benefit the child. They may buy equipment or hire additional staff for the child, or use the payment to offset the parent's cost share, but it must be used to benefit the child

VERIFICATION FOR A CHILD WITH A DISABILITY

To: _____
(Licensed Professional or Director named below)

Return to: _____
(See instructions for where to return form)

Telephone _____

Name of Child _____

The Department of Health & Human Services, Division for Children, Youth, and Families, Child Development Bureau has seen a dramatic increase in the expulsion rate of children from child care centers and family child care homes. Many of these children have behavioral problems, which may be a result of an emotional or psychological disability. Children with an emotional disability must be receiving ongoing treatment. To encourage providers to accept and retain children with special needs, the Department will pay a supplemental rate to all child care providers caring for children with a verified diagnosed disability.

Does the child have a: ☐ medical, ☐ physical, ☐ developmental, or ☐ emotional disability?

The diagnosis of the child's disability is _____

Is this a permanent condition? ☐ Yes ☐ No If not, length of expected duration is _____

I ☐ have ☐ have not provided treatment to the above-mentioned child.

List the name of each provider of disability service for the child _____

☐ I certify that I am the child's attending physician, physician's assistant, advance practice registered nurse, or licensed mental health professional.

☐ I certify that I am currently treating this child for an emotional disability

Signature _____ Date ____/____/____

The child has a current Individual Education Plan ☐ Yes ☐ No

☐ I certify that I am a SAU Special Education Director or Area Agency Director

Signature _____ Date ____/____/____

By signing below, I authorize the verification and release of the information requested above. I understand that the information will be held in the strictest confidence and that it will be reviewed by, or shared with, authorized Department of Health & Human Services' staff involved in the authorizations of Child Care Development Fund Scholarships. This authorization expires 12 months from the date indicated below by the parent or guardian.

Parent or Guardian Signature _____ Date ____/____/____

For chronic non-changing disabilities verification is required only once. For all others, verification is required annually. The disability differential becomes effective the first Monday following the date of signature of the Licensed Professional or Director named above.

Common Billing Errors

- Incomplete invoices
 - **No signatures** or **dates**
 - **Missing** check for **AM** or **PM** and **Absent** or **Present**
 - **Missing** child **RID number**
 - Missing or incorrect **provider codes** (31 when it should have been a 33)
 - If absent, not including the child's expected **start** and **stop** times

Common Billing Errors

- Incorrect information
 - Incorrect child **RID number** entered
 - Child's **name is spelled wrong**, using a nickname or putting first and last names in the wrong places
 - **Parent's name** is where **provider's name** should be
 - Checking **present** when the child was **absent** or checking absent when the child was not scheduled to be there
 - **Illegible handwriting** – can't tell a 7 from a 9

Common Billing Errors - Continued

- Child is not eligible
 - Parent said they submitted all the verification documents, **but didn't**
 - Provider did not receive Provider Notification of Eligibility letter (link letter), but billed anyway
 - Provider **billed in advance** of when child care was provided

Other Billing Problems

- Other billing problems and what to do
 - **Rarely, a DHHS error may occur regarding eligibility**
 - **Parent** must contact the **DFA worker**
 - **Provider** must contact the **Child Development Bureau**
 - **Billing for services more than 90 days** from when the child care was provided – **provider will not get paid**
 - Billing forms sent to the wrong place – **Do not** send bills to the Child Development Bureau. Send them to the Data Management Unit in Concord

Consequences of Invoice Errors

- You must call the Child Development Bureau and notify us of the error. **Do not wait to call us!**
- The number is **1-800-852-3345 ext. 4242**. We will tell you how to correct the error
- You will be required to **resubmit the corrected invoices** to the Data Management Unit with the correct information within 30 days of when the invoices were filed

Consequences of Invoice Errors

- Your payment will be **delayed between 2 and 3 weeks** on average
- All invoice problems must be resolved and payment made within 90 of when the service was provided
- **DHHS will not pay any invoices after 90 days from the date the service was provided**

What is Improper Payment?

- **Definition of Improper Payments:** Improper payments are defined as payments that should not have been made and payments that were made for the incorrect amount under any legally applicable requirement
- **Definition of Fraud:** Fraud means an intentional deception or misrepresentation made by a person with the knowledge that the deception could result in some unauthorized benefit to themselves or some other person.
 - This includes any act that constitutes fraud under the New Hampshire criminal code RSA Title LXII

Improper Billing

- DHHS is looking more closely at improper billing by examining billing practices
- The Child Development Bureau periodically audits child care provider billing by requesting attendance sheets
- We may interview parents, employers and providers
- We may request verification of employment from parents to certify that the parent was employed or in an approved activity such job search or training

Improper Billing

- If you suspect that a parent is not in an approved work related activity, ask the parent about their work activity or activities. Remind the parent that you may only bill when he/she is in the work activity and that he/she must pay you when he/she is not in the work activity
- If after speaking with the parent you believe the parent is no longer participating in an approved work related activity, you must contact the DHHS worker. Failure to report could result in prosecution for fraud and/or terminating your enrollment in the child care scholarship program
- Both providers and parents may be held accountable for improper billing and both may be held responsible for improper billing practices or prosecuted for fraud

Attendance Sheets - Problems

- Billing invoices are not attendance sheets
- We often receive Form 2500 billing invoices when we ask for attendance sheets and we do not accept them for attendance
- Providers may make their own attendance sheets, but they often lack required information for example full names of the children, parent signatures, dates of the week, time in and time out and name of the child care provider
- Attendance sheets must be kept for 7 years
- A provider has 7 days from the date they receive the written request from DHHS to provide attendance sheets

CHILDREN'S ATTENDANCE SHEET

WEEK BEGIN AND END DATE: ____/____/____ TO ____/____/____

CHILD CARE PROGRAM: _____

CLASSROOM/GROUP NAME: _____

NAME OF CHILD	MONDAY		TUESDAY		WEDNESDAY		THURSDAY		FRIDAY		SATURDAY		SUNDAY		PARENT/GUARDIAN SIGNATURE
	ARRIVE	DEPART	ARRIVE	DEPART	ARRIVE	DEPART	ARRIVE	DEPART	ARRIVE	DEPART	ARRIVE	DEPART	ARRIVE	DEPART	
1.															
2.															
3.															
4.															
5.															
6.															
7.															
8.															
9.															
10.															

A PARENT OR GUARDIAN'S SIGNATURE IS REQUIRED IN ORDER FOR PAYMENT TO BE MADE.
CHILD ATTENDANCE RECORDS, MUST AT ALL TIMES, REFLECT THE ACTUAL ARRIVAL AND DEPARTURE TIME.

☐ I CERTIFY THAT THE INFORMATION ON THIS ATTENDANCE SHEET IS TRUE AND ACCURATE.

CHILD CARE PROVIDER'S SIGNATURE _____

How to Avoid Improper Billing

- Do not bill for child care **before** child care services have been provided
- Do not have or allow **parents to sign blank** billing forms or attendance sheets
- Do not **photocopy previously completed signed billing forms or attendance sheets** and submit them for future payments or attendance documentation that have yet to occur
- You may complete and photocopy the top of the Form 2500 billing invoice

How to Avoid Improper Billing

- Do not **overcharge DHHS** for child care to **decrease the parent co-pay or cost share**
- Do not bill for child care when the **parent is not in an approved work activity**
- Do not bill for **holidays** or **snow days** when you are **closed**

How to Avoid Improper Billing - Continued

- Do not bill for days the child is **not in attendance**
- Do not **add attendance hours** in order to increase your payments - no matter what the reason
- Do not care for **more children than you are legally allowed** – you must be licensed to care for more than 3 unrelated children in your home
- If you are not licensed and care for more than 3 children at any one time in your home, you will have to **pay the money back** to DHHS for the additional children

When May You Bill for Child Care?

- When the parent is in an approved work activity
 - Working at a job/employment
 - In job training
 - In an currently approved NHEP employability plan
 - Searching for a job – up to 40 days in a 6 month period
- You have received Provider Notification letter or link letter from DHHS that indicates
 - The dates the child is eligible (start and end dates)
 - The child's RID number
 - The cost share amount
- You may bill after you have provided the child care and the child is eligible

Parent and Provider Must Work Together

- The child care scholarship can only work if the parent and provider work together
- A collaborative working relationship will help make this program work for the child, parent and you the provider
- Plan to spend time with the parent to develop this working relationship
- If problems develop between you and the parent, deal with them immediately – don't wait

Parent and Provider Must Work Together

- In order to receive the scholarship, the **parent** must:
 - Apply for the scholarship assistance through the District Office
 - Provide all necessary verification information within 30 days of applying with DHHS
 - Submit the completed 2530 form with both the parent signature and the provider signature
 - Sign and date the 2500 billing forms – every week
 - Sign the weekly attendance sheets (that are not the same as the 2500 billing form) – every week
 - Pay the cost share and co-pay to you, the provider, if you charge the parent
 - Participate in the 12 month redetermination process to continue to receive services
- Providers can help by reminding parents to sign the billing forms and attendance sheets and complete the redetermination process before the deadline

Parent and Provider Must Work Together

- In order to receive the scholarship, the **provider** must:
 - Enroll or be enrolled as a child care provider as soon as the parent asks you to provide child care
 - Complete the 2530 form that will link you to the child
 - Comply with the Provider Agreement you sign
 - Submit complete accurate 2500 billing forms – weekly
 - Maintain accurate weekly attendance sheets – for 7 years
 - Re-enroll as a provider every 3 years
- Parents can help the provider by signing the billing forms and attendance sheets every week

What Happens If?

- The parent misses the redetermination deadline:
 - The eligibility closes and the parent must reapply for services
 - The link closes between the provider and the child and the provider will not be paid
 - If there is a Wait List, the child will be put on the Wait List unless the child is receiving FANF cash assistance or in preventive/protective child care

What Happens If?

- There is a Wait List and the Child Care Provider Verification form 2530 is not submitted on time:
 - Child care eligibility closes and the parent must reapply for the child care scholarship
 - The child will be put on the Wait List unless the child is receiving FANF cash assistance or in preventive/protective child care

What Happens If?

- The provider has not been paid for child care services provided in the past 90 days:
 - All billing problems or issues must be resolved within 90 days of the service provided
 - The link closes and DHHS cannot pay for any child care services provided during the past 90 days
 - Administrative Rule He-C 6910.19(u): If DHHS does not pay the provider due to the provider's billing practices that are contrary to the provider agreement and these rules, the provider shall forfeit the right to payment and shall not bill the parent for the cost of the services that could have been paid by DHHS

What Happens If?

- The provider has not been paid for child care services provided in the past 90 days:
 - The parent must reapply for the child care scholarship
 - The child will be placed on the Wait List if there is a Wait list
- Make sure to contact the Child Development Bureau as soon as you are made aware of a billing problem
 - The number is 1-800-852-3345 ext. 4242

Changes You Must Report

- Your phone number
- Your physical address
- Your mailing address
- Additional household members if you provide child care in your own home
- Your name – for provider enrollment and billing

Changes You Must Report

- Program name
- Doing Business As Name
- Federal ID number or Social Security Number
- Changing from license exempt to licensed or from licensed to license exempt
- The place where child care is being provided if going from the child's home to the provider's home within 2 days

How to Report and Make Changes

- Submit a new Provider Enrollment form 2620 and a new AW-9 tax form to the Data Management Unit
- These forms must match exactly
 - The provider name
 - Mailing address
 - Physical address
 - Social Security Number or Federal ID tax number
- Mail these forms to:

Data Management Unit
PO Box 2000
Concord, NH 03302-2000

Mistakes in Reporting and Making Changes

- Not calling the Child Development Bureau regarding changes in the location where the child care is being provided. This must be reported within 2 days
- Making information changes such as your address on the 2500 billing form. This does not work and nothing will be changed
- Changing your address at the Post Office will not change where check is sent. Checks will not be forwarded to the new address from the Post Office change
- You must report a change in your licensing status

Why You Need to Report Changes

- To avoid delays in your payments
- To avoid penalties from the IRS
 - Information must match
 - On AW-9 tax form with the new Provider Enrollment form 2620
 - Names
 - Addresses
 - Tax ID numbers – either Federal Tax ID number or Social Security number
- Makes communication easier
- To maintain accurate information for billing

Confidentiality – It's the Law

- Child Care in NH:
 - RSA 170-E:19 (last sentence)

“All records regarding children and all facts learned about children and their relatives shall be kept confidential both by the child day care agency and by the department.”
- This applies to all children and parents/relatives in child care
- Only State employees with a need to know may obtain confidential information

National Association for the Education of Young Children – Code of Ethics

- A few primary points in the Code of Ethics:
 - Treat all children and families equally
 - Do not
 - Deny benefits that are available
 - Give undue advantages to certain children and families
 - Exclude children or families based on prejudice or discriminatory practices
 - Take advantage or exploit a family's circumstances or have relationships that would compromise your ability to care for the child

Child Care Provider Web Billing - Application

- It is easy
- Requires a 3-hour hands-on training in Concord – free of charge
- There is a wait list to attend. Contact us by phone soon to be enrolled
- Advantages to web billing
 - Payments can be made sooner
 - Significantly reduces errors in billing
 - Reduces the number of rejected invoices
 - Problems can be identified sooner such as a child losing eligibility
 - Reduces mailing costs for everyone

Interested in Web Billing and Training?

- Call the Child Development Bureau at:
1-800-852-3345 ext. 4242
- In order to web bill, you must have:
 - An internet connection
 - Access to a computer with Windows 98 or better
 - MS Internet Explorer with version 5.5 or above
- We will provide you with an easy to follow step-by-step manual at the training

Interested in Direct Deposit of Payments?

- Direct Deposit is an Electronic Funds Transfer (EFT) of your child care payments directly into your bank account
- This can be done by accessing the CDB website that has the forms and find Direct Deposit Authorization Agreement – form 2637
- Complete the form and print it out – make a copy
 - If you have multiple Resource ID numbers, you must list each Resource ID number on the form

Interested in Direct Deposit of Payments?

- Mail the original completed form to the address on the form
- How it works:
 - DHHS tells your bank to credit your account after your invoice has been data entered and processed
 - This usually takes 2 business days
 - You are responsible for checking your bank account to assure that the payment is in your account before spending the money

Helpful Websites

- <http://www.dhhs.nh.gov/dcyf/cdb/forms.htm>

This website has all the forms mentioned in this training

- <http://www.dhhs.nh.gov/dcyf/cdb/provider.htm>

This website has the Child Care Provider Billing and Payment Handbook

Thank you for Attending the Child Care
Billing and Payment Webinar